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Abbott Laboratories
100 Abbott Park Road
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Telephone: (847) 935-3325
FAX: (847) 938-2623

FACSIMILE COVER SHEET

DATE: March 4, 2005

To: **Commissioner
United States Patent and Trademark Office**

FROM: Kelly J. McCrystle
Patents and Trademarks
D-0377, AP6D-2
Telephone: 650-474-3326
Fax: 847-938-2623

PHONE NUMBER OF TELECOPY MACHINE: (703) 872-9306

TOTAL NUMBER OF PAGES (INCLUDING THIS COVER SHEET): 6

MESSAGE:

U.S. Application No.: 10/660,288
Filed: September 11, 2003
Title: Articulating Suturing Device and Method
Abbott Ref: 6771.US.P4

Enclosed herewith for the patent application identified above is the following:

1. Transmittal Letter (1 page)
2. PTO Form SB/O8A (2 pages, in duplicate)
3. Information Disclosure Statement (2 pages, in duplicate)

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PATENTS
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Zung, Michael

Serial No.: 10/660,288

Filed: September 11, 2003

For: Articulating Suturing Device and Method

Attorney Docket No.: 6771.US.P4

Art Unit: Unassigned

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Kelly J. McCrystle Date

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P.O. Box 1450
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TRANSMITTAL LETTER

Dear Sir:

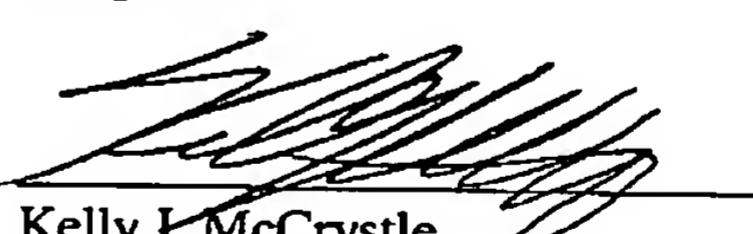
Enclosed herewith for the patent application identified above are the following:

1. Information Disclosure Statement (2 pages, in duplicate)
2. Form PTO-1449 (2 pages, in duplicate)

The Commissioner is hereby authorized to charge any additional Filing Fees required under 37 CFR §1.16, as well as any patent application processing fees under 37 CFR §1.17 associated with this communication for which full payment had not been tendered, to Deposit Account No. 01-0025.

23492

Respectfully submitted,
Zung, et al.


Kelly J. McCrystle
Registration No. 46,257
Attorney for Applicants

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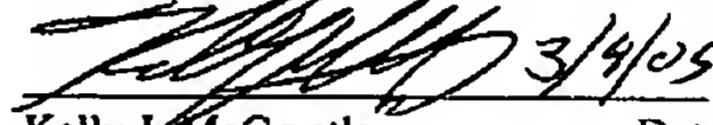
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Kelly J. McCrystle

Date
3/4/05

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P.O. Box 1450
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INFORMATION DISCLOSURE STATEMENT

Dear Sir:

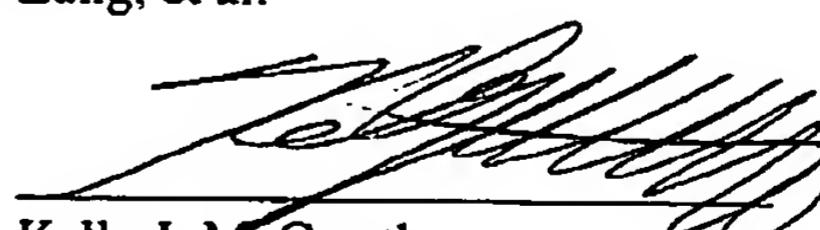
Pursuant to 37 C.F.R. §§ 1.56 and 1.97(b), Applicants bring to the attention of the Examiner the documents listed on the attached PTO 1449. This Information Disclosure Statement is being filed before the mailing date of a first Office action on the merits. Applicant respectfully requests that the Examiner consider the listed documents and evidence that consideration by making appropriate notations on the attached form. Copies of the listed documents are attached if necessary as specified under 37 C.F.R. §1.98.

Applicants hereby authorize the Commissioner to charge or credit any over payments to Deposit Account No. 01-0025. The Commissioner also is authorized to charge our Deposit Account any additional fees (or credit any over payments) that may be required under 37 C.F.R. §§ 1.16 and 1.17 in association with this communication for which full payment has not been tendered. A duplicate of this sheet is enclosed.

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ABBOTT LABORATORIES
Telephone: (650) 474-3326
Facsimile: (847) 938-2623

Respectfully submitted,
Zung, et al.


Kelly J. McCrystle
Registration No. 46,257
Attorney for Applicants

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Applicant: Zung, Michael

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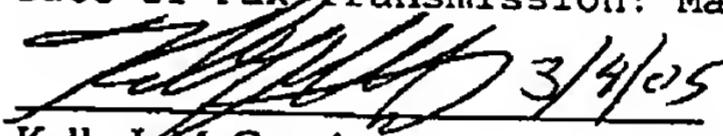
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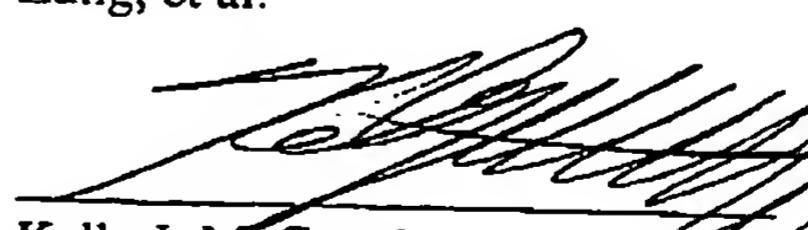
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 Telephone: (650) 474-3326
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Respectfully submitted,
 Zung, et al.


 Kelly J. McCrystle
 Registration No. 46,257
 Attorney for Applicants

PTO/SB/08A (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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Substitute for form 1449/PTO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>		Application Number	10/660,288
		Filing Date	September 11, 2003
		First Named Inventor	Zung, Michael
		Art Unit	unassigned
		Examiner Name	unassigned
Sheet	1	of	1
		Attorney Docket Number	6771.US.P4

Examiner Signature		Date Considered	
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		Application Number	10/660,288
		Filing Date	September 11, 2003
		First Named Inventor	Zung, Michael
		Art Unit	unassigned
		Examiner Name	unassigned
Sheet	1	of	1
		Attorney Docket Number	6771.US.P4

Examiner Signature		Date Considered	
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